

**Commonwealth of Massachusetts
The Trial Court
Juvenile Court Department**

_____ Division

Docket No. _____

PETITION FOR THE ADOPTION OF A MINOR

(If petitioner is married, his/her spouse must join the petition.)

Petitioner No. 1

(PRINT name of petitioner)

(street address)

(city or town/state/zip code) (county)

(telephone number)

Petitioner No. 2

(PRINT name of petitioner)

(street address)

(city or town/state/zip code) (county)

(telephone number)

state that they are (he/she is) desirous of adopting the following child:

1. _____
(child's name)

Date of Birth _____

(name of mother or parent no. 1)

(street address)

(city or town/state/zip code)

Place of Birth _____

(name of father or parent no. 2)

(street address)

(city or town/state/zip code)

2. The petitioner(s) is (are) of sufficient ability to rear the child, and to provide suitable support and education for the child; and

3. ☐ the child has resided for at least six months in the home of the petitioner(s)
- ☐ the child was the subject of a proceeding pursuant to M.G.L. c. 210, §3 or pursuant to M.G.I. c. 119, § 26 wherein the Court dispensed with the need for consent or notice to the parent(s) on a petition for adoption.
- ☐ the child was the subject of a surrender which was executed pursuant to M.G.L. c. 210, §2. At the time of her surrender, the mother was _____ years old. At the time of his surrender, the father was _____ years old.
- ☐ the child is a blood relative or stepchild of the petitioner(s).
- ☐ the child is the care and custody of the petitioner.

WHEREFORE, they (he/she) request(s) that the Court, grant them, him/her leave to adopt said child; and (if applicable)

- ☐ waive the residence requirement for good cause: (explain)

- ☐ decree that said child's name be changed to that of _____.

Date _____

Signature of First Petitioner

Signature of Spouse/Second Petitioner

This petition is sponsored, recommended and approved by _____
a charitable corporation organized under the laws of the Commonwealth of Massachusetts for the purpose of
engaging in the care of children and principally so engaged.

CHILD'S CONSENT

I _____, being above the age of twelve years hereby consent to this adoption
(PRINT name of child)
as requested above.

Date: _____

Signature: _____

NOTARIZATION

The above named child _____ made an oath before me on _____
(name of child) (date)
that this consent is his/her free act and deed.

Date: _____

Signature: _____

Print Name: _____ My Commission Expires: _____

AFFIDAVIT OF PETITIONER(S) FOR ADOPTION

Parent No. 1/Mother

(PRINT name of petitioner, including maiden name if applicable)

(street address)

(city or town/state/zip code)

(telephone number)

(date of birth)

(place of birth: city/town, state, county, country)

(occupation at the time of adoption)

Parent No. 2/Father

(PRINT name of petitioner)

(street address)

(city or town/state/zip code)

(telephone number)

(date of birth)

(place of birth: city/town, state, county, country)

(occupation at the time of the adoption)

I (We) hereby request that a certificate of this adoption be sent to the city or town clerk of the place of the child,
and that the clerk of the records amend the birth certificate of the child to reflect this adoption.

SIGNATURE OF PARENT NO. 1/MOTHER

SIGNATURE OF PARENT NO 2/FATHER

NOTARIZATION

The above signed made oath before me on _____

that this affidavit is her/his free act and deed.

Notary Public _____

Print Name _____

My Commission Expires _____

The above signed made oath before me on _____

that this affidavit is his/her free act and deed.

Notary Public _____

Print Name _____

My Commission Expires _____